

BOROUGH OF MORPETH.

ANNUAL

R E P O R T S

OF

THE MEDICAL OFFICER OF HEALTH

(DR. HUGH DICKIE)

AND

THE SANITARY INSPECTOR (MR. J. DAVISON)

THE HOUSING INSPECTOR (MR. A. ADAMS).

FOR THE YEAR 1925.

Morpeth:

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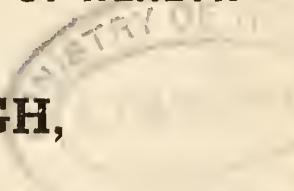


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REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR
MORPETH BOROUGH,
1925.



MR. MAYOR,

THE Ministry of Health has called upon the Medical Officers of Health throughout the country on this occasion for a survey report dealing with the quinquennium, 1921-5 inclusive, as well as specially with last year. It is the Ministry's desire to have an account of the measure of progress made in recent years, in the improvement of the public health, the changes towards betterment made in the district, and the various services affecting public health, as also the action and schemes contemplated by this Council in the same direction.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

The area of this borough is 323 acres. That it should remain at this low figure when the population has increased, when building is so cramped by the scarcity of suitable land for houses within the borough is a matter of great regret.

Morpeth lies in a hollow, beautifully situated, but dreadfully circumscribed. To find proper falls for sewerage is, in a large part of the area difficult; the fact that so large a part of the town lies close to the level of the river with the consequent undue height of the subsoil water, and the greater incidence of sickness of certain kinds that, in my opinion, this entails, is a hindrance to the growth of a town whose other advantages as a manufacturing, distributing, and residential centre are obvious, and may be defined later on. Frequently and at special times in the civic year efforts are promised in the Council to remedy this paucity of acreage, and extend the borough boundaries, but these always seem to peter out when the driving force of a municipal election has exhausted itself. Hence it comes that our merchant princes are in many cases forced to seek more open spaces and lower rates in the growing townships of Newminster, Hepple, and the like. The commendable efforts of the Council to provide houses for the working classes, not only to meet the growing need of those actually without houses of their own, but to provide such a number of healthy houses as would enable them to make a clean sweep of the hideous slums in our yards and back streets, are cramped and rendered hopelessly inadequate by the narrowness of our confines.

I beg to remind the Council that my Unhealthy Areas Report of 1919, which was accepted by the Council, has never yet been acted upon.

The Town's Chief Industries are Market Gardening and Iron-founding, but in addition, situated as it is on the edge of the coal mining district it has sometimes been derogatively described as a pit village. Certainly quite an appreciable number of its adult manhood works in the adjacent pits of Pegswood, Ashington, Netherton, and Choppington and travels to and from its daily task by train, bus, push bicycle, and on foot. There are also little pits which spasmodically open and close according to the state of trade, or the financial resources of their owners, to the west and south of the borough, as well as to the east where the better known coal fields lie. To them, as well as to the agricultural community which surrounds us and extends far to the west, Morpeth is a metropolis, pleasantly situated and convenient to the Great North Road, and the Railway. It is a pity that the boundaries of the Borough are so narrow. Both working class houses for the miners and artizans and residential houses for the class of people who desire to cease active work on the farm and elsewhere, are badly needed here. While financial depression exists as a post-war legacy, and the future of the coal trade is doubtful, not much can be expected, but if, as we expect, history will repeat itself and a boom set in, this is a good time to anticipate and prepare for a greater Morpeth by enlarging the boundaries.

THE POPULATION at the Census of 1921 was 7,580, estimated by natural increase it is now 7,662. The increase is slow as is usual in semi-rural areas where there is no boom, and no fresh development of trade. Many such towns in England, some even in this county are diminishing. I should consider that for a town of its size it is fairly flourishing, and a good business centre: its quasi-metropolitan situation and functions tend to this effect. The number of inhabited houses in 1921 was 1,757; the rateable value is £30,502, and the sum represented by 1d. rate is £110. The natural features of the borough and the social conditions have not undergone any special change in the last 5 or 15 years. During the war there was a good deal of timber removed for pit props, and other urgent needs, and no adequate attempt has been made to replace such timber. This is to be regretted both from a national and hygienic as well as an aesthetic point of view. The occupation of the inhabitants presents no change for many years. It is partly a residential town where citizens who, have made a competency elsewhere, or had it made for them, can spend their declining years, while there is a fair, if not undue proportion who live somehow without making that competency or any likelihood of doing so.

The Vital Statistics are presented in a different part of the Report. Speaking generally the average death rate and infantile mortality are higher than that of similar towns in England. I attribute this to the continued existence of undoubted slums and to the cramped conditions of the borough already referred to at length. Though I have not been supported in my theory, I still believe that the height of the sub-soil water due to the low lying position of the bulk of the town near the river and the persistence, in spite of my repeated jeremiads, of the weirheads is a great contributing cause. There are no occupational diseases

but the effect of environment though not easy to prove still, in the direction I have just indicated, continues to keep up our death rate.

HOSPITALS.—The Hospitals in the Borough are first: the Morpeth Isolation Hospital on the Common, $1\frac{1}{2}$ -miles away. This serves for all kinds of infectious diseases, and has been used for small-pox during the outbreak of 1925. The building is ideally situated, but being a make-shift, not so constructed, tho' on the whole it has been able to cope with our needs. Still there only two wards, and it is obvious that, when there are more than one infectious disease present simultaneously the building is inadequate. It has been used for 1 small-pox case to the exclusion, on such an occasion, of all other cases. This is a lamentable and reprehensible method of dealing with infectious diseases and I shall welcome the scheme already foreshadowed of establishing a joint small-pox hospital for several contiguous authorities, and I feel sure my Council will do the same. Even this will not make the position ideal, as it is obviously not utopian that when there is for example, scarlet fever in the Isolation Hospital here, diphtheria or enteric fever cases have to be isolated as best they can at their homes. Second, there is a Cottage Hospital of eight beds. It is supported by subscription, small endowments, and the patients' fees. It has a staff of two, but the District Nurse living there, contributes a modicum of her time to its staffing. It does excellent and necessary work, but is not by any means a model building, being merely a converted three storey house. Since the advent of motor transport the conveyance of very serious accidents and surgical cases to the Royal Victoria Infirmary, Newcastle, has become easy and therefore frequent. It is well that it is so, as Morpeth being on the great North Road, in summer gets more than her share of motor traffic, and the accidents incidental to it. The borough shares in the use of the Tuberculosis Sanatoria at Woolley, and that for children so close to our confines at Stannington. Since the inception of the Princess Mary Hospital, occasional Maternity cases also are sent to Newcastle. There is no ambulance vehicle in the town itself, but modified motor cars are used, and for the cases of miners and their families requiring such mode of transit the ambulances at the neighbouring collieries are readily available. The only Institutional provision for unmarried mothers, illegitimate infants and homeless children in the area is the Union Workhouse and the Cottage Homes attached to it. If alterations are made in the Poor Law, as is forecasted, perhaps the stigma attached unfairly to some of such cases, may be removed. In the meantime, the attention and care given to such cases in the Workhouse itself and the Childrens's Homes (about 40 cases) is beyond reproach.

Clinics and Treatment Centres.—There has been an Infant Welfare Centre carried on in the Borough during the five years under review as before. There are usually about 120 children on the register annually, and the average weekly attendance is about 30. This does good work, and the improvement in the cleanliness and clothing of the children attending has been quite evident. It is true that I find it impossible to get regular, or even frequent attendance on the part of the babies of the poorest class—"too busy at home" and "not having

good enough clothes" are the excuses usually made, but inherent apathy is also a reason. Still, the instructions given even to the proportion of mothers who attend seems to permeate through the town. From my long experience I can confidently aver that the standard of care and intelligence in the management of young babies is higher by far than it used to be ; that the cases of stupid and improper feeding of babies at one time, alas, so common, is now infrequent and that this is one of the causes of the decided fall in Infantile Mortality. For instance the outbreak of infantile diarrhoea which used to devastate the young life of the borough every year with hardly an exception has not occurred during the last five years. The people are now aware, by propaganda, of the danger of fly convection and take some precautions when formerly they did not. The U.D.C. is assisting this year by disinfecting horse middens, etc. There are no other Clinics or Treatment Centres in the Borough.

PUBLIC HEALTH OFFICERS.—Besides the Medical Officer of Health (part time) there are a full time Sanitary Inspector and an Assistant who acts as Housing Inspector. There is a Health Visitor and a Maternity Nurse who work in the area, but are under the County Council. No provision is made for professional nursing in the houses by the Council directly. There is however, a District Nurse under the supervision of the County Nursing Association, and financed by public and voluntary subscriptions. There is no provision made for nursing infectious diseases except at the Isolation Hospital where the matron has a certificate and for whom skilled assistance is provided when needed. There is only one Midwife practising in the district, namely : the Maternity Nurse who is financed by public subscription and patients' fees. The U.D.C. contributes annually to the funds of the Cottage Hospital.

CHEMICAL WORK.—There is none done in the Borough, all such, and laboratory cases being dealt with in the appropriate quarters in Newcastle-on-Tyne. The water is periodically tested and has always been found satisfactory. I have not at hand the analyst's report.

PREVALANCE & CONTROL OF INFECTIOUS DISEASES. This Borough has shared with the rest of the county the various outbreaks of influenza as an epidemic at different times during the past five years. None of these has been specially noteworthy nor destructive of life. Enteric Fever has been very rare here since the drainage and sewage schemes came into operation over twenty years ago, and since the water supply became practically all spring water, Diphtheria has always been merely sporadic, and generally attributed to outside infection. Antitoxin is kept at a Central Depot and supplied free to all who are qualified to use it.

There has been in all about one case per annum of encephalitis lethargica notified. No cases of return scarlet fever have been discovered. Scarlet fever has never been present in a serious epidemic, and the type of this disease seems to be modifying in a benign direction. Most of the cases seen and notified have been so mild that there is ground for

believing that it is kept alive by the difficulties of detecting it.

Pathological and Bacteriological specimens are examined by the Bacteriologist at the College of Medicine at Newcastle. Cases of tuberculosis are reported through the Medical Officer of Health and the Chief Tuberculosis Officer of the County, and his advice taken as to action necessary. No use has been made of the Schick & Dick tests in diphtheria and scarlet fever.

On the outbreak of small-pox (twice within the last year) the Medical Officer, who is also vaccination officer for the district, vaccinated all contacts with the exception of those who refused, and carried on an active campaign of vaccination and revaccination; in all nearly 1,000 cases of vaccination and revaccination were done. Many of these were of those who had previously been conscientious objectors and got exemption on that ground. Measles, whooping cough, mumps, etc., have been at times prevalent here as elsewhere, no figures can be given of these diseases.

School intimation of disease is always followed up and treatment carried out or recommended. The mortality from influenza as such is not easy to estimate, as few are certified as dying directly from that disease in this locality, but it is an element and contributory cause in some of the deaths, especially broncho pneumonia at the extreme of life.

Disinfection of infected houses is promptly and efficiently done on the instructions of the Medical Officer of Health by the Assistant Inspector.

During the year there were infectious diseases notified as follows:—Small-pox, 1; Scarlet Fever, 32; Diphtheria, 3; Enteric Fever 66. There was 1 death from enteric fever; 1 from diphtheria; 7 from, measles; 2 from influenza; 1 from meningitis; 4 from pulmonary tuberculosis, and 1 from T.B. other forms.

Tuberculosis new cases.

AGES.

1— 5	1 Non Pulmonary	...	male	...	1 death.
5—10	1 Pulmonary	...	„	...	
10—15	1 Non Pulmonary	...	„	...	
20—25	1 Pulmonary	...	female	...	
25—35	2 Pulmonary	...	„	...	
35—45	1 Pulmonary, male; 2 Pulmonary, female				1 death.
45—55	23 male Pulmonary.				
55—65	1 male Pulmonary.				

No action needed to be taken under any of the Articles of the Public Health (Prevention of Tuberculosis) regulations of 1925.

There were no cases of ophthalmia neonatrum.

HOUSING.—During the last five years the demand for suitable houses for the working class has not diminished, and the provision of houses of the class erected by the Council during the years 1909-13, and during 1925 is still the most pressing need of the town.

There are numerous cases of overcrowding, and a considerable number of newly married people living in with parents or in furnished lodgings. Further, it will only be possible to deal effectively with insanitary property when a sufficiency of houses has been provided.

During the five years ending Dec. 31st, 1925, 120 houses have been completed, all of which have been occupied except two; a number of these houses are of a larger type, say 6, 7, and 8 rooms. The total includes 72 houses built under the State Aided Scheme and completed in 1921.

The Council have acquired land for additional houses, and hope to receive the approval of the Ministry for the subsidy for the houses proposed to be built. Building land is difficult to obtain within the borough.

Systematic Housing Inspection is carried out by the Housing Inspector appointed at the latter end of 1924.

WATERWORKS.—The Council have had under consideration proposals for an augmented supply during the past year, but so far, no scheme has been adopted. The existing supply is from Tranwell chiefly, where there are two storage reservoirs with a capacity of $12\frac{3}{4}$ million gallons; during a dry season the supply is supplemented by pumping from boreholes; from these sources alone the yield is equal to a supply per head of the population of 8,000 of 29 gallons when run 24 hours per day. Usually the pumps are run for about 12 to 16 hours daily during the driest period of the year.

The rainfall during the last five years was as follows :—			
1921—22·97 inches.	Pumped during year—	27,298,320 gallons.	
1922—26·62 "	"	—19,569,740	"
1923—23·97 "	"	—28,700,000	"
1924—31·56 "	"	— Nil	
1925—29·71 "	"	—18,472,740	"

There are two smaller reservoirs which supply part of the town in addition to the Tranwell reservoirs.

SEWERAGE.—The bacterial filters installed in 1903, continue to work satisfactorily, the effluent being uniformly good. The whole of sewage is pumped from a collecting tank to the purification works, and an average of approximately 90,000,000 gallons per annum is dealt with.

SCAVENGING.—The scavenging of the town is done by the Council under the supervision of the Borough Surveyor by direct labour, the Council keeping their own horses and vehicles. Ordinarily about 55 per cent. of ash refuse is disposed of as manure, while the remainder consisting of dry ashes is led to tips outside of the town.

There 26 covered ashpits, 33 uncovered ashpits, 144 privies with fixed receptacles, and 214 with removable receptacles. There are 1,062 waterclosets, 12 of the latter were conversions during 1925; 8 were additional, and 23 were for new buildings erected during 1925; the increase of W.C.s. during the last five years being 197.

FOOD INSPECTION.—The inspection of food is carried out by the Medical Officer of Health and the Sanitary Inspector, and no cases have arisen during the year where proceedings were taken. In some instances tradesmen called attention to articles of food supplied to them where its character was doubtful.

HOSPITAL.—Hospital accommodation for infectious cases is provided, and during the past five years 49 patients have been treated, 10 of them during 1925.

The question of a joint hospital for small-pox has been under consideration by the various authorities in this part of the county, and their representatives have met in conference to discuss the proposals. Morpeth has been fortunate to escape any serious outbreak, although the surrounding collieries have had a great number of cases.

HUGH DICKIE, M.A., M.D.

BOROUGH OF MORPETH.

SANITARY INSPECTOR'S REPORT FOR YEAR ENDING DEC. 31ST, 1925.

The following nuisances have been attended to during the year, viz.:—

Defective and insufficient ashpit accommodation	...	...	25
Defective waterclosets and privies	...	...	14
New drains inspected and tested	...	...	13
Additional waterclosets	...	...	8
Conversions from privies	...	...	12
W.C.'s. to new buildings	...	...	23
Obstructed drains, gullies, and waterclosets	...	...	44
Patients removed to hospital	...	...	10
Houses disinfected	...	...	28
Closing orders made	...	...	...none
Overcrowding common owing to shortage of housing			
Animals improperly kept	...	...	1
Defective spouting and dampness	...	...	2
Statutory notices served	...	...	2
Informal notices served...	...	...	103

SLAUGHTER HOUSES.

Public Slaughterhouses ... 8	Inspections made	56
Registered Slaughterhouses 1	Notices to cleanse & limewash	36

COMMON LODGING HOUSES.

Registered Lodging Houses...3	Inspections made	78
Sleeping Accommodation...185	Notices to cleanse & limewash, &c.	9

DAIRIES AND COWSHEDS.

Dairies & Milk Purveyors ... 5	Inspections made	9
Cowkeepers in Borough ... 3	Do. ...	12
Notices served ... 6		

FACTORIES AND WORKSHOPS.

Factories ... ...23	Workshops ...40	Workplaces ...5
Inspections made ...34	Inspections made... 56	Inspections made ...9

BOROUGH OF MORPETH.

HOUSING AND TOWN PLANNING.

REPORT OF HOUSING INSPECTOR FOR YEAR ENDING DEC. 31st, 1925.

Number of Houses inspected :—

Self-contained ... 61
Tenements ... 58
Total... 119

Number of houses re-inspected 98

The under-mentioned defects were found existing, viz.:—

Defective drainage	26
Dangerous structures	2
Defective spouting	23
Dampness	35
Insufficient drainage	19
Insufficient and improper ash and privy accommodation	50
Joiner and plaster repairs	33
Overcrowding	1
Unpaved yards	2
Untrapped waste pipes	19

The defects remedied to date are :—

Dangerous structures	1
General structural defects	98

ANDREW ADAMS,

Housing Inspector.

VITAL STATISTICS
FOR QUINQUENNIAL, 1921-25 (inclusive)

Year.	Popl.	Birth Rate.	General Death Rate,	Infantile Mortality per 1,000 Births.
1921	7580	24.1	16.09	103.8
1922	7679	24.1	15.3	143.8
1923	7732	25.8	11.1	75.
1924	7640	21.5	12.5	90.09
1925	7662	22.2	13.4	104

Compare with 4 years in last decade.

1911	7460	26.4	15.	165.
1912	7506	23.	17.	111.
1913	7590	28.	19.	149.
1914	7656	24.	16.	164.

War years omitted.

	Pp. over-estimated			
1919	7750	22.5	15.3	181.
1920	7800	30.2	15.5	101.

SHEET I.

(Sanitary Officers' Order 1922 Art. 19 (12)).

Sanitary Inspector's Annual Report: Year ending Dec. 31st, 1925.

SHEET II.

YEAR 1925.

District: MORPETH URBAN. Inspector: J. DAVISON.

SUMMARY OF WORK EFFECTED:—

Water Supply.	Drainage.	Sanitary Conveniences				TOTAL
			After letter or interview.	After informal notice.	After Statutory Notice.	
		Privies abolished ...	12	12		12
		Privies repaired ...				
		Privy ash pits abolished ...	8	8		8
		Privy ash pits roofed or repaired ...				
		Pail-closets abolished ...				
		Water closets provided ...	8	12		20
		Water closets repaired ...	14			14
		Sanitary bins provided ...	50			50
		Sanitary bins renewed ...				
		New drains constructed ...	13			13
		Drains repaired or reconstructed		42	2	44
		Additional gullies provided ...				
		Old gullies replaced ...		No record.		
		Scullery sinks provided ...				
		Scullery waste-pipes repaired ...		6		6
		Scullery waste-pipes trapped ...				
		Yards repaired or reconstructed ...				
		Sources closed or discontinued —		No. of houses affected		—
		New services provided ... —		No. of houses affected		—

River Pollution :—

Cases detected...	Particulars.
Remedied	do.
S.D. Works provided	do.
.....
.....
.....

SHEET III.

Year, 1925.

*Inspector: J. DAVISON.***UNSOOUND FOOD.****Surrendered.**

- | | |
|--------------------------------|-----------|
| 1. Beef (Home-killed) | |
| 2. Beef (Imported) | |
| 3. Mutton (Home-killed) | |
| 4. ,, (Imported) | |
| 5. Pork | |
| 6. Game | |
| 7. Poultry | |
| 8. Fish | |
| 9. Fruit, or | |
| 10. Canned Goods ; Tins, Cases | |
| 11. Bacon | |
| 12. Cheese | |
| 13. Butter | |
| 14. Lard ... | ... |
| 15. Other Foods | ... 1 |

Annual Report of the Medical Officer of Health for Year 1925

For the Urban District of Morpeth

on the administration of the Factory and Workshop Act, 1901 in
connection with

FACTORIES, WORKSHOPS, & WORKPLACES.

1.—Inspection of Factories, Workshops, and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisance

PREMISES.	INSPECTIONS.	NUMBER OF WRITTEN NOTICES.
Factories (including Factory Laundries) ...	23	...
Workshops (including Workshop do.) ...	40	...
Workplaces (Other than Outworkers premises) ...	5	...
Total...68		—

2.—Defects found in Factories, Workshops, and Workplaces.

PARTICULARS.	FOUND.	REMEDIED.
Other nuisances ...	... 4	4

NORTHUMBERLAND COUNTY COUNCIL.

MEDICAL OFFICER'S DEPARTMENT.

Sheet IV.

District: MORPETH URBAN COUNCIL.

Housing (Inspection of District) Regulations, 1910.

(Tabular Statement as required by Article V.)

Inspector : ANDREW ADAMS.	TOTAL.	SUB-DISTRICTS
---------------------------	--------	---------------

(1) Number of dwelling houses inspected	119	
(2) Number considered " unfit for habitation "	1	
(3) Complaints as to { (a) Householders	1	
(4) " unfitness " by :— { (b) Parish Councils	Nil	
(5) { No. of " Representations to L.A." ..	"	
(6) Closing Orders { No. of Orders made ... ..	..	"
(7) { No. determined after repair .. ..	..	"
(8) No. of houses { (a) After " informal Notice " ..	98	(Partly repaired)
(9) .. { (b) " Notice under Section 28" ..	Nil	
(10) made fit for { (c) " Closing Order made " ..	"	
(11) habitation { (d) By L.A. in default of owner ..	"	
(12) No. of houses closed { (a) After notice under Sect. 28	"	
(13) voluntarily { (b) Without " Notice "	"	
(14) No. of houses { (a) Under " Demolition Orders " ..	Nil	
(15) demolished { (b) Voluntarily by owners	"	
General character of defects—Structural defects, defective spouting, dampness, improper and insufficient sanitary accommodation and overcrowding.		

- (a) No. of " Representations " as to
Obstructive Buildings Nil
- (b) No. of such buildings demolished "
- (c) Representations as to
Unhealthy areas... "

